**Agency Name**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Audit**  **Report** | **Finding**  **Number** | **Finding and**  **Resolution** | | |
| XXXX | XXX | Finding: |  | |
|  |  |  |  |  |
|  |  | Fraud Amount: |  |  |
|  |  |  |  |  |
|  |  | Amount to be recovered: |  |  |
|  |  |  |  |  |
|  |  | Recovery to date: |  |  |
|  |  |  |  |  |
|  |  | Resolution/Status: |  | |
|  |  |  |  | |
|  |  | Personnel Action Taken: |  | |
|  |  |  |  | |
|  |  | Criminal Action Taken: |  | |
|  |  |  |  | |
|  |  | Agency  Contact: | Name  Title  Address  Phone Number  E-mail address | |